

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

ADDRESS (number and street) ▼

177 Perrys Bridge Rd.

☐ Check if different than previously reported. (ACC)

Belvidere

NC

27919

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00250589

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

01

01

2015

06

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Kim Hendrix

Signature of Treasurer

Kim Hendrix

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

07

07

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">4842.57</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">4842.57</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">17726.48</span>	<span style="border: 1px solid black; padding: 2px;">17726.48</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">22569.05</span>	<span style="border: 1px solid black; padding: 2px;">22569.05</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">8485.78</span>	<span style="border: 1px solid black; padding: 2px;">8485.78</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">14083.27</span>	<span style="border: 1px solid black; padding: 2px;">14083.27</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	1		2	0	1	5		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	5		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4038.60	4038.60
(ii) Unitemized .....	9832.88	9832.88
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	13871.48	13871.48
(b) Political Party Committees .....	2125.00	2125.00
(c) Other Political Committees (such as PACs).....	1130.00	1130.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	17126.48	17126.48
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	600.00	600.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	17726.48	17726.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17726.48	17726.48

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	8485.78	8485.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	8485.78	8485.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8485.78	8485.78
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8485.78	8485.78

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	17126.48	17126.48
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17126.48	17126.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	8485.78	8485.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	8485.78	8485.78

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 6 OF 22  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. Gail Blanton**

Mailing Address 3069 Dartmouth Dr.

City	State	Zip Code
Greenville	NC	27858

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Time Invsmt Corp

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1583.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11AI.11880

Amount of Each Receipt this Period

1493.55

Full Name (Last, First, Middle Initial)

**B. Helga Brown**

Mailing Address 4004 Shinnecook Dr

City	State	Zip Code
New Bern	NC	28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Plant Partners, Inc

Occupation

Merchandise

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2015

Transaction ID : SA11AI.11879

Amount of Each Receipt this Period

475.05

Full Name (Last, First, Middle Initial)

**C. Kim Cotten-West**

Mailing Address 7580 Long Ridge Rd.

City	State	Zip Code
Plymouth	NC	27962

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DCRI

Occupation

clinical research

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2015

Transaction ID : SA11AI.11704

Amount of Each Receipt this Period

70.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2038.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A. Taylor Griffin**

Mailing Address PO Box 3451

City State Zip Code  
 New Bern NC 28562

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Sulgrave Partner

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 07 / 2015

Transaction ID : SA11AI.11695

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Taylor Griffin**

Mailing Address PO Box 3451

City State Zip Code  
 New Bern NC 28562

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Sulgrave Partner

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2015

Transaction ID : SA11AI.11752

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Taylor Griffin**

Mailing Address PO Box 3451

City State Zip Code  
 New Bern NC 28562

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Sulgrave Partner

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2015

Transaction ID : SA11AI.11769

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 8 OF 22

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. Taylor Griffin**

Mailing Address PO Box 3451

City

New Bern

State

NC

Zip Code

28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sulgrave Partner

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1070.00

Date of Receipt

04 / 21 / 2015

Transaction ID : SA11AI.11779

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Taylor Griffin**

Mailing Address PO Box 3451

City

New Bern

State

NC

Zip Code

28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sulgrave Partner

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1080.00

Date of Receipt

05 / 31 / 2015

Transaction ID : SA11AI.11888

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. LAW FOR CONGRESS**

Mailing Address 1102 Huff Dr

City

Jacksonville

State

NC

Zip Code

28546

FEC ID number of contributing  
federal political committee.

C C00573766

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

04 / 16 / 2015

Transaction ID : SA11AI.11962

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

560.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 22  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. John Mullinex**

Mailing Address 143 King Creek Dr

City State Zip Code  
Havelock NC 28532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2015

Transaction ID : SA11AI.11768

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

**B. John Mullinex**

Mailing Address 143 King Creek Dr

City State Zip Code  
Havelock NC 28532

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 23 / 2015

Transaction ID : SA11AI.11827

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C. Bob Pruett**

Mailing Address PO Box 695

City State Zip Code  
Beaufort NC 28516

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pruett Rentals

Occupation

self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
04 / 21 / 2015

Transaction ID : SA11AI.11765

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

280.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY

Full Name (Last, First, Middle Initial)

**A. Bob Pruett**

Mailing Address PO Box 695

City	State	Zip Code
Beaufort	NC	28516

FEC ID number of contributing federal political committee.

C

Name of Employer

Pruett Rentals

Occupation

self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	23	/	2015

Transaction ID : SA11AI.11837

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B. Bob Pruett**

Mailing Address PO Box 695

City	State	Zip Code
Beaufort	NC	28516

FEC ID number of contributing federal political committee.

C

Name of Employer

Pruett Rentals

Occupation

self-employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2015

Transaction ID : SA11AI.11889

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**C. Matthew Schwob**

Mailing Address 2318 Oakview Dr

City	State	Zip Code
New Bern	NC	28562

FEC ID number of contributing federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2015

Transaction ID : SA11AI.11770

Amount of Each Receipt this Period

135.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. Matthew Schwob**

Mailing Address 2318 Oakview Dr

City State Zip Code  
 New Bern NC 28562

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 04 23 2015

Transaction ID : SA11AI.11860

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

10.00

4038.60

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 22

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. Craven County GOP**

Mailing Address PO Box 13466

City State Zip Code  
 New Bern NC 28561

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11990**

Amount of Each Receipt this Period

400.00

In-kind -

Full Name (Last, First, Middle Initial)

## **B. Crystal Coast GOP Womens Club**

Mailing Address PO Box 1492

City State Zip Code  
 Morehead City NC 28557

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11997**

Amount of Each Receipt this Period

900.00

In-kind -

Full Name (Last, First, Middle Initial)

## **C. Gates County Republican Party**

Mailing Address 386 Daniel Rd

City State Zip Code  
 Corapeake NC 27926

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.12010**

Amount of Each Receipt this Period

40.00

In-kind -

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1340.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 22

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. Greene County Republican Party**

Mailing Address 1826 Shady Grove Church Rd

City State Zip Code  
 Snow Hill NC 28580

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

70.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.12009**

Amount of Each Receipt this Period

70.00

In-kind -

Full Name (Last, First, Middle Initial)

## **B. Jones County GOP**

Mailing Address 2308 Hwy 41 W

City State Zip Code  
 Trenton NC 28585

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11994**

Amount of Each Receipt this Period

100.00

In-kind -

Full Name (Last, First, Middle Initial)

## **C. Onslow County Republican Party**

Mailing Address PO Box 716

City State Zip Code  
 Jacksonville NC 28541

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11984**

Amount of Each Receipt this Period

75.00

In-kind -

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

245.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 22

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. Onslow County Republican Party**

Mailing Address PO Box 716

City State Zip Code  
 Jacksonville NC 28541

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11993**

Amount of Each Receipt this Period

25.00

In-kind -

Full Name (Last, First, Middle Initial)

## **B. Onslow County Republican Party**

Mailing Address PO Box 716

City State Zip Code  
 Jacksonville NC 28541

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11996**

Amount of Each Receipt this Period

300.00

In-kind -

Full Name (Last, First, Middle Initial)

## **C. Pitt County GOP**

Mailing Address PO Box 8498

City State Zip Code  
 Greenville NC 27835

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

40.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11988**

Amount of Each Receipt this Period

40.00

In-kind -

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

365.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 22

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. Pitt County GOP Women's Club**

Mailing Address 134 Oakmont Dr.  
Apt. 17

City State Zip Code  
Greenville NC 27858

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

125.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11991**

Amount of Each Receipt this Period

50.00

In-kind -

Full Name (Last, First, Middle Initial)

## **B. Pitt County GOP Women's Club**

Mailing Address 134 Oakmont Dr.  
Apt. 17

City State Zip Code  
Greenville NC 27858

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11992**

Amount of Each Receipt this Period

75.00

In-kind -

Full Name (Last, First, Middle Initial)

## **C. Washington County GOP**

Mailing Address 7580 Long Ridge Rd

City State Zip Code  
Plymouth NC 27962

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

**04** / **18** / **2015**

**Transaction ID : SA11B.11995**

Amount of Each Receipt this Period

50.00

In-kind -

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

175.00

2125.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 22

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. Carteret Co GOP**

Mailing Address 5303 Emerald Dr

City State Zip Code  
Emerald Isle NC 28594

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

**04** / **07** / **2015**

**Transaction ID : SA11C.11949**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

## **B. Committee to Elect Pat McElraft**

Mailing Address PO Box 5195

City State Zip Code  
Emerald Isle NC 28594

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

**04** / **07** / **2015**

**Transaction ID : SA11C.11952**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Crystal Coast Republican Men**

Mailing Address 202 Mulligan Dr

City State Zip Code  
Peletier NC 28584

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

**04** / **07** / **2015**

**Transaction ID : SA11C.11950**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

230.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 22

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. East Carolina Republican Women**

Mailing Address PO Box 14481

City State Zip Code  
New Bern NC 28561

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

**03** / **30** / **2015**

**Transaction ID : SA11C.11947**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. John Bell Committee**

Mailing Address 501 Holland Hill

City State Zip Code  
Goldsboro NC 27530

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

**04** / **07** / **2015**

**Transaction ID : SA11C.11951**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

## **C. Onslow Republican Women**

Mailing Address 502 White Oak St

City State Zip Code  
Jacksonville NC 29540

FEC ID number of contributing  
federal political committee.

**C** C00000000

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

**04** / **07** / **2015**

**Transaction ID : SA11C.11948**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 22

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. WALTER JONES COMMITTEE**

Mailing Address PO BOX 3962

City  
GREENVILLEState  
NCZip Code  
27836FEC ID number of contributing  
federal political committee.**C** C00305052

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

**Transaction ID : SA11C.11953**

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

**B. WALTER JONES COMMITTEE**

Mailing Address PO BOX 3962

City  
GREENVILLEState  
NCZip Code  
27836FEC ID number of contributing  
federal political committee.**C** C00305052

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2015

**Transaction ID : SA11C.11954**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

600.00

**TOTAL** This Period (last page this line number only)..... ►

1130.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 22  
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

## **A. Chris Millis Committee**

Mailing Address PO Box 878

City State Zip Code  
Hampstead NC 28443

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2015

**Transaction ID : SA16.11977**

Amount of Each Receipt this Period

600.00

Donation Check never cleared bank

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

600.00

600.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 22

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. Kim Cotten-West**

Mailing Address 7580 Long Ridge Rd.

City Plymouth      State NC      Zip Code 27962

Purpose of Disbursement  
Reimbursement - Convention Program

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 17 / 2015
**Transaction ID : SB21B.11972**

Amount of Each Disbursement this Period

393.14

Full Name (Last, First, Middle Initial)

**B. Craven County GOP**

Mailing Address PO Box 13466

City New Bern      State NC      Zip Code 28561

Purpose of Disbursement  
In-kind -

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2015
**Transaction ID : SB21B.12006**

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**C. Crystal Coast GOP Womens Club**

Mailing Address PO Box 1492

City Morehead City      State NC      Zip Code 28557

Purpose of Disbursement  
In-kind -

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04 / 18 / 2015
**Transaction ID : SB21B.11999**

Amount of Each Disbursement this Period

900.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1693.14

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 22

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. Greenville Hilton**

Mailing Address 207 SW Greenville Blvd

City Greenville      State NC      Zip Code 27834

Purpose of Disbursement  
Deposit Convention Venue

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
02      12      2015
**Transaction ID : SB21B.11966**

Amount of Each Disbursement this Period

900.00

Full Name (Last, First, Middle Initial)

**B. Greenville Hilton**

Mailing Address 207 SW Greenville Blvd

City Greenville      State NC      Zip Code 27834

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      23      2015
**Transaction ID : SB21B.11975**

Amount of Each Disbursement this Period

3982.31

Full Name (Last, First, Middle Initial)

**C. Onslow County Republican Party**

Mailing Address PO Box 716

City Jacksonville      State NC      Zip Code 28541

Purpose of Disbursement  
In-kind -

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      18      2015
**Transaction ID : SB21B.12000**

Amount of Each Disbursement this Period

300.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5182.31

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 22

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**THIRD DISTRICT NORTH CAROLINA REPUBLICAN PARTY**

Full Name (Last, First, Middle Initial)

**A. Ralph Rhodes**

Mailing Address 2403 Garys Ln

City New Bern      State NC      Zip Code 28562

Purpose of Disbursement  
Award - 50/50 Raffles

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 18 / 2015
**Transaction ID : SB21B.11974**

Amount of Each Disbursement this Period

253.00

Full Name (Last, First, Middle Initial)

**B. Voter Integrity Project**

Mailing Address 30 Ambergate Dr

City Youngsville      State NC      Zip Code 27596

Purpose of Disbursement  
Donation

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 01 / 2015
**Transaction ID : SB21B.11968**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City      State      Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

753.00

7628.45